

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Implementing Handwritten Shorthand in a Computer System  
Attorney Docket Number:: 003797.00737  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 9  
Small Entity?:: NO  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Peter  
Middle Name::  
Family Name:: Williamson  
Name Suffix::  
City of Residence:: Kirkland  
State or Province of Residence:: WA  
Country of Residence::  
Street of mailing address:: 13520 137<sup>th</sup> Place NE  
City of mailing address:: Kirkland  
State or Province of mailing address:: WA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 98034

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Nina  
Middle Name::  
Family Name:: Hawley  
Name Suffix::  
City of Residence:: North Bend  
State or Province of Residence:: WA  
Country of Residence::  
Street of mailing address:: 210 SE 10<sup>th</sup> Street  
City of mailing address:: North Bend

State or Province of mailing address:: WA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 98045

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Li  
Middle Name::  
Family Name:: Lu-Porter  
Name Suffix::  
City of Residence:: Bellevue  
State or Province of Residence:: WA  
Country of Residence::  
Street of mailing address:: 16762 SE 48<sup>th</sup> Place  
City of mailing address:: Bellevue  
State or Province of mailing address:: WA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 98006

### **Correspondence Information**

Correspondence Customer Number:: 28319

### **Representative Information**

Representative Customer Number:: 28319

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

## **Assignee Information**

Assignee name:: Microsoft Corporation

Street of mailing address:: One Microsoft Way

City of mailing address:: Redmond

State or Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code of mailing address:: 98052